24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
THE CONSERVATIVE STRIKEFORCE	C C00457291
Check If Z 24-hour report 48-hour report New report Amends report file	d on 04 29 2012
Full Name (Last, First, Middle Initial) of Payee	Date
STRATEGIC CAMPAIGN GROUP INC	M M / D D / Y Y Y Y
Mailing Address 4600 N FAIRFAX DRIVE	05
SUITE 802	Amount
City State Zip Code ARLINGTON VA 22203	3700.00
	Transaction ID : SE.71053
Purpose of Expenditure Category/ Type 001	Senate
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 26
	eck One: X Support Oppose
Calendar Year-To-Date Per Election Dis	bursement For: Primary General
for Office Sought 3700.00 2011	X Other (specify) ► Special-General
Full Name (Last, First, Middle Initial) of Payee	Date
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Category	ice Sought: House State:
Type	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	eck One: Support Oppose
	Support Oppose
Calefidal Teal-10-Date Fel Election	bursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3700.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF CHIROTHESE INdependent Experientation	
(c) TOTAL Independent Expenditures	3700.00
	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
SCOTT B MACKENZIE [Electronically Filed] Data	04 / D D / Y Y Y Y Y
Signature Date	04 29 2012